

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

Fee Code	Total # of Claims	Number Entered	X	Fee	Fee	Total
Sm./Lg.				Sm. Entry	Lg. Entry	
Basic Filing Fee	201111	69	49	_____	690	_____
Total Claims > 20	201101	9	6	_____	882	_____
Independent Claims > 1	202001			_____	468	_____
Multi-Dep Claim Present	204104			_____		_____
Surcharge	205105			_____	180	_____
English Translation	119			_____		_____

TOTAL FEE CALCULATION:

Fees due upon filing the application

Total Filing Fees Due = \$ 2170

Less Filing Fees Submitted = \$ _____

BALANCE DUE = \$ 2170

WY

Office of Initial Patent Examination

Figure 7

2437 41 48 5455

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999	Application or Docket Number
---	------------------------------

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	64 minus 20 = *	44
INDEPENDENT CLAIMS	9 minus 3 = *	6
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY
TYPE ☐

OR

OTHER THAN
SMALL ENTITY

RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=		OR	X\$18=	882
X39=		OR	X78=	468
+130=		OR	+260=	
TOTAL		OR	TOTAL	2040

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT A

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
Total *	Minus **	=	
Independent *	Minus ***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

AMENDMENT B

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
Total *	Minus **	=	
Independent *	Minus ***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
Total *	Minus **	=	
Independent *	Minus ***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.